

Application No. (if known): 10/524,305

Attorney Docket No.: 09867/0202189-USO

## Certificate of Express Mailing Under 37 CFR 1.10

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MS Amendment  
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on February 17, 2009  
Date

*J. Stantini*

Signature

*J. Stantini*

Typed or printed name of person signing Certificate

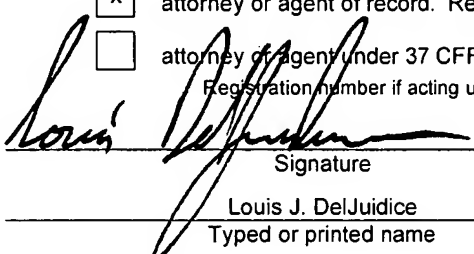
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Amendment in Response to Non-Final Office Action (17 pages)  
Amendment Transmittal (1 page)  
One Month Request for Extension of Time Under 37 CFR 1.136(a)  
(1 page)  
Charge \$130.00 to deposit account 04-0100  
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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2009</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H. R. 4818).)</i>		<b>Docket Number (Optional)</b> 09867/0202189-USO	
Application Number      10/524,305-Conf. #6456		Filed      September 6, 2005	
For    REMOTE CONTROL SYSTEM AND ITS TRANSMITTER AND MOVABLE MACHINE			
Art Unit      4138		Examiner      B. A. Gebremichael	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$130	\$65      \$ 130.00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$490	\$245      \$
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1110	\$555      \$
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1730	\$865      \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175      \$
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/>	A check in the amount of the fee is enclosed.		
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number      04-0100		
<b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the	<input type="checkbox"/>	applicant/inventor.	
	<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
	<input checked="" type="checkbox"/>	attorney or agent of record. Registration Number      47,522	
	<input type="checkbox"/>	attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34      _____	
		February 17, 2009	
Signature		Date	
Louis J. DelJuidice		(212) 527-7700	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/>	Total of      1      forms are submitted.		